

Commonwealth of Massachusetts Division of Medical Assistance Provider Manual Series OXYGEN AND RESPIRATORY THERAPY EQUIPMENT MANUAL	SUBCHAPTER NUMBER AND TITLE 6 SERVICE CODES AND DESCRIPTIONS		PAGE 6-1
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601 Explanation of Abbreviations

The following abbreviations are used in Subchapter 6.

(A) I.C. indicates that the claim will receive individual consideration to determine payment.

(B) P.A. indicates that prior authorization is required.

602 Service Codes and Descriptions

Service

Code Service Description

A4481	Tracheostoma filter, any type, any size, each
A4556	Electrodes (e.g., apnea monitor), per pair
A4557	Lead wires (e.g., apnea monitor), per pair
A4558	Conductive paste or gel
A4611	Battery, heavy duty; replacement for patient-owned ventilator (P.A.)
A4612	Battery cables; replacement for patient-owned ventilator (P.A.)
A4613	Battery charger; replacement for patient-owned ventilator (P.A.)
A4615	Cannula, nasal
A4616	Tubing (oxygen), per foot
A4617	Mouthpiece
A4618	Breathing circuits
A4619	Face tent
A4620	Variable concentration mask
A4621	Tracheostomy mask or collar
A4622	Tracheostomy or laryngectomy tube (adult)
A4623	Tracheostomy, inner cannula (replacement only)
A4624	Tracheal suction catheter, any type, other than closed system, each
A4625	Tracheostomy care kit for new tracheostomy
A4626	Tracheostomy cleaning brush, each
A4627	Spacer, bag or reservoir, with or without mask, for use with metered dose inhaler
A4628	Oropharyngeal suction catheter, each
A4629	Tracheostomy care kit for established tracheostomy
E0424	Stationary compressed gaseous oxygen system, rental; includes container, contents, regulator, flowmeter, humidifier, nebulizer, cannula or mask, and tubing (P.A.)

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602 Service Codes and Descriptions (cont.)

Service

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E0431	Portable gaseous oxygen system, rental; includes portable container, regulator, flowmeter, humidifier, cannula or mask, and tubing (P.A.)
E0434	Portable liquid oxygen system, rental; includes portable container, supply reservoir, humidifier, flowmeter, refill adaptor, contents gauge, cannula or mask, and tubing, (includes contents) (P.A.)
E0441	Oxygen contents, gaseous (for use with owned gaseous stationary systems or when both a stationary and portable gaseous system are owned), one month's supply = 1 unit (P.A.)
E0443	Portable oxygen contents, gaseous (for use only with portable gaseous systems when no stationary gas or liquid system is used), one month's supply = 1 unit (P.A.)
E0450	Volume ventilator, stationary or portable, with backup rate feature, used with invasive interface (e.g., tracheostomy tube) (rental, first six months, per month) (P.A.)
E0452	Intermittent assist device with continuous positive airway pressure device (CPAP or BiPAP) (rental, first six months, per month) (P.A.)
E0453	Therapeutic ventilator; suitable for use 12 hours or less per day (P.A.)
E0455	Oxygen tent, excluding croup or pediatric tents (P.A.) (I.C.)
E0457	Chest shell (cuirass) (P.A.) (I.C.)
E0459	Chest wrap (P.A.) (I.C.)
E0460	Negative pressure ventilator, portable or stationary (i.e., Porta-Lung) (rental, first six months, per month) (P.A.)
E0462	Rocking bed, with or without side rails (P.A.) (I.C.)
E0480	Percussor, electric or pneumatic, home model (P.A.)
E0500	IPPB machine, all types, with built-in nebulization; manual or automatic valves; internal or external power source (P.A.)
E0550	Humidifier, durable for extensive supplemental humidification during IPPB treatments or oxygen delivery (P.A.)
E0555	Humidifier, durable, glass or autoclavable plastic bottle type, for use with regulator or flowmeter (P.A.) (I.C.)
E0560	Humidifier, durable for supplemental humidification during IPPB treatment or oxygen delivery (P.A.)
E0565	Compressor, air power source for equipment which is not self-contained or cylinder driven (P.A.)
E0570	Nebulizer; with compressor

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Service

<u>Code</u>	<u>Service Description</u>
E0575	Nebulizer; ultrasonic, large volume (P.A.)
E0580	Nebulizer; durable, glass or autoclavable plastic, bottle type, for use with regulator or flowmeter (P.A.)
E0585	Nebulizer; with compressor and heater (P.A.)
E0600	Respiratory suction pump, home model, portable or stationary, electric (P.A.)
E0601	Continuous airway pressure (CPAP) device (P.A.)
E0605	Vaporizer, room type (purchase)
E0606	Postural drainage board (purchase)
E0608	Apnea monitor (rental, first six months, per month) (P.A.)
E1340	Repair or nonroutine service for durable medical equipment requiring the skill of a technician technician, labor component, per 15 minutes (i.e., breaking down sealed components) (parts only) (I.C.)
E1353	Regulator (P.A.) (I.C.)
E1355	Stand/rack
E1372	Immersion external heater for nebulizer
E1375	Nebulizer, portable with small compressor, with limited flow (P.A.)
E1390	Oxygen concentrator, capable of delivering 85 percent or greater oxygen concentration at the prescribed flow rate (P.A.)
E1399	Durable medical equipment, miscellaneous (P.A.) (I.C.)
K0168	Administration set, small volume nonfiltered pneumatic nebulizer, disposable
K0169	Small volume nonfiltered pneumatic nebulizer, disposable
K0170	Administration set, small volume nonfiltered pneumatic nebulizer, nondisposable (P.A.)
K0171	Administrative set, small volume filtered pneumatic nebulizer
K0172	Large volume nebulizer, disposable, unfilled, used with aerosol compressor
K0173	Large volume nebulizer, disposable, prefilled, used with aerosol compressor
K0174	Reservoir bottle, nondisposable, used with large volume ultrasonic nebulizer
K0175	Corrugated tubing, disposable, used with large volume nebulizer, 100 feet
K0176	Corrugated tubing, nondisposable, used with large volume nebulizer, 10 feet (I.C.)
K0177	Water collection device, used with large volume nebulizer
K0178	Filter, disposable, used with aerosol compressor
K0179	Filter, nondisposable, used with aerosol compressor or ultrasonic generator
K0180	Aerosol mask, used with DME nebulizer

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K0181	Dome and mouthpiece, used with small volume ultrasonic nebulizer
K0182	Water, distilled, used with large volume nebulizer, 1000 ml
K0183	Nasal application device, used with CPAP device (P.A.)
K0184	Nasal pillows/seals, replacement for nasal application device, pair (P.A.)
K0185	Headgear, used with CPAP device (P.A.)
K0186	Chin strap, used with CPAP device (P.A.)
K0187	Tubing, used with CPAP device (P.A.)
K0188	Filter, disposable, used with CPAP device
K0189	Filter, nondisposable, used with CPAP device
K0190	Canister, disposable, used with (patient-owned) suction pump
K0191	Canister, nondisposable, used with (patient-owned) suction pump
K0192	Tubing, used with suction pump
K0268	Humidifier, nonheated, used with positive airway pressure device (P.A.)
K0269	Aerosol compressor, adjustable pressure, light duty for intermittent use (with CPAP device) (P.A.) (I.C.)
K0270	Ultrasonic generator with small volume ultrasonic nebulizer (P.A.) (I.C.)
K0531	Humidifier, heated, used with positive airway pressure device (P.A.)
K0532	Respiratory assist device, bi-level pressure capability, without backup rate feature, used with noninvasive interface, e.g., nasal or facial mask (intermittent assist device with continuous positive airway pressure device) (P.A.)
K0533	Respiratory assist device, bi-level pressure capability, with backup rate feature, used with noninvasive interface, e.g. nasal or facial mask (intermittent assist device with continuous positive airway pressure device) (P.A.)
K0534	Respiratory assist device, bi-level pressure capacity, with backup rate feature, used with invasive interface, e.g., tracheostomy tube (intermittent assist device with continuous positive airway pressure device) (P.A.)
X0440	Stationary liquid oxygen system, includes use of reservoir, contents indicator, regulator, flowmeter, humidifier, nebulizer, cannula or mask, and tubing (P.A.)
X0442	Oxygen contents, liquid, per unit (one unit = one pound) (P.A.)
X5032	Airway clearance device (rental, first six months, per month) (P.A.)
X5033	Airway clearance device (continued rental after six months, per month) (P.A.)
X5034	Airway clearance device (purchase) (P.A.)

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602 Service Codes and Descriptions (cont.)

Service

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X5045	Oximetry monitor, portable (spot check) (rental, first six months, per month) (P.A.)
X5046	Comprehensive aerosolized pentamidine treatment (with portable booth)
X5048	Suction kit; contains catheter, glove, and pop-up basin
X5050	Peak flow meter
X5053	Oximetry monitor, portable (spot check) (continued rental after six months, per month) (P.A.)
X5356	Tracheostomy or laryngectomy tube (pediatric) (I.C.)
X5357	Tracheostomy twill tape, ¼"
X5358	Tracheostomy, Velcro ® collar
X5360	Resuscitator, manual (nondisposable)
X5362	Volume ventilator, stationary or portable (continued rental after six months, per month) (P.A.)
X5367	Negative pressure ventilator, portable or stationary (i.e., Porta-Lung) (continued rental after six months, per month) (P.A.)
X5368	Negative pressure ventilator, stationary (rental, first six months, per month) (P.A.)
X5369	Negative pressure ventilator, stationary (continued rental after six months, per month) (P.A.)
X5376	Apnea monitor (continued rental after six months, per month) (P.A.)
X5377	Oximetry monitor (rental, first six months, per month) (P.A.)
X5378	Oximetry monitor (continued rental after six months, per month) (P.A.)
Y9858	Repair (labor, per hour only)
Z6509	Comprehensive aerosolized pentamidine treatment

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